

2005 White House
Conference on Aging

Post-Event Summary Report

Name of Event: Nassau County White House Conference Independent Aging Event

Date of Event: June 15, 2005

Location of Event: Hofstra University, Uniondale, New York
(Include city and state)

Number of Persons attending: 300

Sponsoring Organization(s): Nassau County Department of Senior Citizen Affairs (DSCA)

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Please follow this format for each priority area, with the most important listed first. **Please ensure that your organization's name and contact information is provided at the bottom of each page submitted.**

Priority issue #1: (describe specific issue)

The Medicare Prescription Drug, Improvement and Modernization Act of 2003 has resulted in a great deal of confusion, uncertainty, complication and worry for seniors regarding Plan D prescription drug coverage. Since Part D is not standardized and different plans have different formularies, pharmacy networks and cost-sharing requirement, beneficiaries will have an extremely difficult time selecting the best plan for themselves. Beneficiaries who sign up with a drug plan are generally locked in for a year; however, insurers can end coverage for a particular drug, or increase the co-payment, if they give 60 days notice to patients and the government. The premiums and cost sharing provisions of Plan D will be a financial burden to those whose current retiree plans cost less than Medicare Part D, but who must enroll to avoid late penalties. Drugs purchased outside of a plan will not be counted towards the total out-of-pocket costs and may cause total costs to exceed projected costs. Essentially, this plan promised a comprehensive drug benefit to retirees and the coverage falls far short of its promise.

Barriers: ((list any barriers that may exist related to this issue)

1. Prohibiting Medicare from using its bulk purchasing power to reduce drug costs
2. Prohibiting drug importation presents people from taking advantage of lower drug prices available
3. Prohibiting flexibility of plan change for beneficiary to ensure continuity of needed drugs when formulary coverage is changed
4. Eligible organizations/companies can collect government subsidies and it's possible that the retiree benefits could be reduced

Proposed Solution(s): (list suggested solutions to the challenges described above)

1. Controlling prescription costs by reducing demand through prohibiting advertising to the general public
 2. Permitting the importation of prescription drugs from Canada
 3. Allow Medicare to negotiate price savings through bulk purchases
 4. Counseling people to enable them to make appropriate, informed choices
 5. Having all prescription drug costs count towards out-of-pocket costs
 6. Allowing people to change plans whenever formularies do not cover their prescription needs would improve health care and increase satisfaction with drug coverage
 7. Change the law so that companies/organizations are not eligible for subsidies if they substantially reduce coverage from current levels
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Submitted by the Nassau County Medicare Prescription Drug, Improvement and Modernization Act of 2003 Sub-Committee of the Leg. Tech. Adv. Comm.

Ann R. O'Connor, Chairperson